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Government
Publications

Ontario


A Guide to Advance Care Planning

Helping you know and exercise your rights in
preparing for a time when you may be unable
to make decisions about your care.

THIS PUBLICATION IS FREE OF CHARGE.

Communication / Choice / Respect





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A Key Initiative of the Ontario Government

This *Guide to Advance Care Planning* has been developed by the government of Ontario as part of Ontario's Strategy for Alzheimer Disease and Related Dementias, which was released in September 1999.

Accompanying this guide is a wallet card, found on page 35, which we encourage you to fill out and keep in your wallet

Ontario was the first in Canada to develop a comprehensive, multi-faceted Strategy on Alzheimer Disease. The government is investing \$68.4 million over five years – 1999 to 2004 – in this Strategy to improve the quality of life for those people with Alzheimer Disease and related dementias and provide support to the families who care for them. It will also help train health professionals and expand services.

Advance Directives On Care Choices is one of ten key initiatives in this Strategy. This specific initiative was created to help seniors and persons with dementia in Ontario



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things that really matter to you, who would make those decisions for you? How could they know what you would or wouldn't prefer?

It's important to take steps now, **while you are capable**, to ensure **your wishes**, not someone else's, guide the decisions made for your care and medical treatment if you ever become unable to make such decisions yourself. This is what advance care planning is about: Making clear how you wish to be cared for, and giving someone you **trust** the authority to act on those wishes for you, if the need arises.

This booklet encourages people to talk about their care wishes with their families and those who will make decisions for them in the future, in the event they are unable to make decisions themselves. It explains step-by-step what you need to do to begin your process of advance care planning and provides answers to some frequently asked questions. Included are options available to help you take the steps NOW that are right for you.

Personal Stories

At age 75, Henry has developed Alzheimer Disease. He can still make decisions on his own so he and his wife, Ann, have begun to talk about his wishes and plan for his future care. As a result, Henry feels comfortable that Ann knows what is important to him, and Ann feels better able to make the right care decisions for Henry when the time comes.

Claudette is in good health in her 60s but she has firm views on the kind of medical care she would want if, for example, she had a sudden stroke. Her daughter, Lise, lives far away, so Claudette's good friend, Johanne, has agreed to make care decisions for Claudette if her decision-making ability is ever affected. Claudette has talked over her future care wishes with both Johanne and Lise to make sure they understand what matters most to her, and has given Johanne authority to act for her through a Power of Attorney for Personal Care.



Why Do Advance Care Planning?

What is advance care planning?

10 Advance care planning is about making choices now, while you are capable, about how you wish to be cared for in the future if you become incapable of making decisions. It is also about giving someone you trust the information and authority to act on those wishes for you. This person is called your **substitute decision-maker**.

Advance care planning is different from, but just as important as making plans for your finances, property, estate, will or funeral arrangements.

What does “capable” mean in this context?

To be capable of making personal care choices means that you can understand information that is relevant to making a decision about your health care, nutrition, shelter, clothing, hygiene or safety, and can grasp the likely results of making the decision or not making it.

For health care, your doctor or other health care provider needs to have your informed consent. In

order for you to give informed consent, you must be capable, given information about your condition, the recommended treatment, alternatives to the proposed treatment and the likely outcomes of either accepting or refusing the treatment.

Why is advance care planning important?

Advance care planning gives you the opportunity to make choices about your future personal care. It can give you the peace of mind that someone you know and trust understands your wishes and will act on them on your behalf, should they ever need to.

It can make it easier for everyone concerned: easier for you, because you'll have the confidence that your wishes are known; easier for those close to you, because it can reduce their stress in making tough decisions on your behalf; and easier for your care providers, because they'll be able to act in keeping with your wishes in an emergency.

Does advance care planning *have* to be done?

It is your choice whether to do advance care planning or not. **No one can do it for you or make you make those choices.** It is your right to express

your wishes, to appoint a substitute decision-maker and to expect your wishes to be followed. There is no legal requirement to do advance care planning. You are not legally obliged to state your wishes in any form before you can get health care, or move into a care facility.

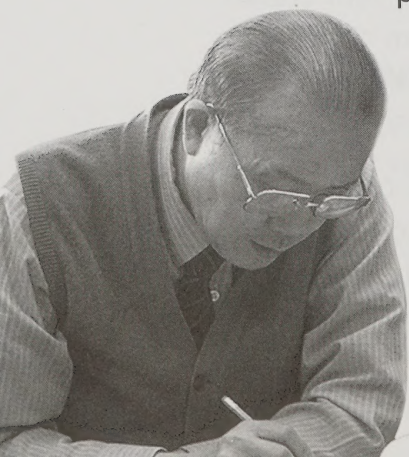
Making Personal Care Choices

What kinds of personal care choices can be made?

You can express your wishes about anything related to your personal care - where you want to live, what you want to eat and wear, what kind of health care you want, how you prefer to be groomed and how you want your safety ensured. If, for any reason, you are not mentally capable of making a personal care choice that needs to be made, your health care

providers are required to take direction from your substitute decision-maker.

Your substitute decision-maker must follow your expressed wishes wherever possible. If it is impossible to follow your wishes, your substitute decision-maker must act in your best interests.



How can these choices best be made?

There is no one-size-fits-all formula for advance care planning. The process calls for careful thought and communication.

You may find it useful to think about your own values, wishes and resources. For example, is it important to you to live in your own home as long as possible? Do you have the financial means to do this? If you are unlikely to recover from an illness, do you wish to receive medical care that will prolong your life?

You should talk these things over with people who are close to you – it will help you now and them in the future.

You do not have to specify decisions for all possible situations; in fact, this would be impossible to do! It is more important that your substitute decision-maker knows you, your values and beliefs and feels confident in acting on your behalf.

Communicating Your Choices

Who needs to know that advance care choices have been made?

14 Advance care planning is about communicating what personal care you do or do not want to receive in the future to whoever will be making those decisions for you if you are not capable. That would be, first and foremost, your substitute decision-maker, but could also include your family, close friends, doctor, lawyer, or other care providers, as you see fit.

Your family and friends may need encouragement and time to accept the idea of advance care planning before they are ready to hear about your wishes for the future. Many people do not like to talk about illness, mental incapacity or death. Tell them how important it is to you to talk about this now. Talk through potential disagreements on care options, as this may prevent problems later on.

How can you ensure that your care choices are understood?

Your values and beliefs will influence your wishes. Talk about them with your substitute decision-maker and those close to you, to help them understand your wishes clearly.

You may change your mind at any time. Review your wishes on a regular basis with your substitute decision-maker and make sure your family, friends and care providers are aware of any changes. The more they know about your care wishes, the better they will be able to act on them. **The personal care wishes you express while capable are legally binding.**

Talk to your substitute decision-maker about whether it is helpful if your care wishes are expressed in writing.

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Do care choices need to be in writing?

No. You can express your care wishes to your substitute decision-maker any way you like. It can be done face to face or with a recording device such as an audiotape or videotape, or in any written form, including Braille or Bliss Board.

However, in order to name someone as your substitute decision-maker, you must appoint them in writing through a Power of Attorney for Personal Care. How to do this is explained later in this guide, beginning on page 22.

What happens if changes are made to advance care choices?

You can always change your mind about your care wishes. But be sure to tell your substitute decision-maker that your wishes have changed. You can do this face-to-face or any other way you choose.

Your decision-maker is obligated to follow your last known capable wishes no matter how you expressed them. However, if you have given any previous instructions about your personal care in writing or on audiotape or videotape, you may want to revise them and add the new date.

When Advance Care Choices Take Effect

Any wishes that you express concerning your future personal care will take effect only if you become incapable of making the relevant personal care decision for yourself.

Your substitute decision-maker only makes decisions for you that you are not capable of making yourself. If you remain capable of making some or any personal care decisions, then you continue to do so.

Who decides if a person is no longer capable of making decisions?

- The health care provider offering the treatment to you decides whether you are capable or not of making decisions about your medical treatment, admission to a long-term care facility or personal assistance services in a long-term care facility.

This kind of assessment is ongoing, rather than a one-time event, because your ability to make decisions can vary greatly with your condition, from month to month, week to week, or even day to day. It can also vary with the type of decision to be made.

- For other personal care decisions you have two options. Your substitute decision-maker can decide whether you are capable of making the decision or not.

OR

You may prefer to have an independent confirmation of your mental incapacity with regard to personal care decisions.



You can state that wish in a document called a Power of Attorney for Personal Care. If you do this, the person you name as your attorney for personal care cannot start making decisions for you until the independent confirmation is made.

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In the Power of Attorney for Personal Care you can name a person close to you to provide the independent confirmation of your incapacity to make personal care decisions—for example, your family doctor or a good friend. Or you can specify a certain kind of professional, such as a psychologist or social worker. If you ask for an independent confirmation of incapacity without specifying who you would like to provide it, a professional capacity assessor will provide that independent confirmation.

What if you disagree with a health practitioner's finding of your mental incapacity?

You can appeal a finding of mental incapacity to the Consent and Capacity Board, which is an independent body created by the Ontario government. Its members can be psychiatrists, lawyers, or members of the public.

Among other things, the board can hold a hearing to review your capacity to make decisions about health treatment, personal assistance services, or admission to a long-term care facility. There is no charge to go to the Consent and Capacity Board.

For more information, contact the **Consent and Capacity Board**.

Telephone: 416-327-4142

Web site: www.ccboard.on.ca

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Choosing Your Substitute Decision-Maker

What is a substitute decision-maker?

A substitute decision-maker is someone who makes decisions on your behalf if you become incapable of making them yourself.

Who can be a substitute decision-maker?

You can choose to appoint anyone who is **willing** and **able** to act on your behalf to be your substitute decision-maker **except**:

- someone who is paid to provide you with personal care e.g., your nurse, unless this person is your spouse, partner or relative,
- someone who is mentally incapable,
- someone who is under 16 years of age.

It is likely you will want to choose someone close to you, whom you **trust** and who knows you well. It is important that you discuss your intent to name the person ahead of time to make sure they are willing to act for you if it becomes necessary.

What is the role of a substitute decision-maker?

If you become unable to make decisions, your doctor or other health care providers must contact your substitute decision-maker to seek their consent before your doctor or other health care provider can give you treatment.

An exception would be an emergency situation where a health care provider may not know your wishes and may have to act quickly.

However, health care providers have to follow your wishes, if they know what they are, in any and all emergency situations.



Your substitute decision-maker must try to make the same personal care choices that you would have made in that situation, and follow your instructions if you gave any. He or she acts for you only when you are unable to make decisions yourself. That situation could be temporary, or it could last for the rest of your life.

Your substitute decision-maker must:

- maintain contact with you, involving you as much as possible in any decision about your care,
- get all the relevant information from health care providers about your medical care and treatment,
- follow your known care wishes as much as possible in making any decisions that come up about your personal care.

For some decisions, you may not have given any instructions or your substitute decision-maker may not know of any wishes you have that might apply. In that case, your substitute decision-maker must consider your values and beliefs, weigh the probable benefits and risks of any course of action, and make decisions based on what he or she believes to be in your best interests.

How to Give Your Substitute Decision-Maker Power to Act for You

How and why do you appoint a substitute decision-maker?

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To give someone power to act on your behalf, you must appoint them to be your substitute decision-maker in writing, through a document called a Power of Attorney for Personal Care.

The person you appoint is called your attorney for personal care – this is a specific type of substitute decision-maker. You can appoint more than one substitute decision-maker, and you can direct them to make decisions together or separately.

If you do not appoint an attorney for personal care, your health care providers must get consent or refusal of consent for treatment from the first person available to act for you from a hierarchy of substitute decision-makers set out by law. See page 30 in this booklet for more information on the order that health care providers must follow to identify that individual. Not only may this person not be your first choice of person to act on your behalf, this person only has

the authority to make decisions related to your health care, admission to a long-term care facility, and the personal assistance services you receive in a long-term care facility.

- Therefore, it is important to designate a substitute decision-maker through a Power of Attorney for Personal Care to ensure you have a person of **your** choice making decisions about **both** your health care and other aspects of your personal care.

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What is a Power of Attorney for Personal Care?

A Power of Attorney for Personal Care is a document through which you appoint your substitute decision-maker and give them the power to make decisions about all aspects of your personal care, unless you specify otherwise. This includes your health care, shelter, clothing, nutrition, hygiene, and personal safety.

A Power of Attorney for Personal Care may only be used if you become incapable of making a particular decision. You continue to make your own decisions until found incapable.

To be valid, a Power of Attorney for Personal Care must be signed and dated by you. Two witnesses must watch you do this, then they must co-sign the document in your presence, and in the presence of each other. At the time that you sign it, you must be able to understand what the document means and that the person you name as your substitute decision-maker will make decisions for you when you are not capable for a particular personal care decision. The person you appoint as substitute decision-maker cannot act as a witness, neither can his or her spouse or partner. As well, witnesses cannot be under 18 years old and cannot be your spouse, partner or child.

If you wish, you can appoint more than one attorney for personal care. For example, you may want your brother and your daughter to make decisions together on your behalf. In that case, all your attorneys for personal care must agree before a decision can be made on your behalf, unless you state in the document that they can make decisions separately.

You may also appoint different attorneys to make different kinds of personal care decisions—for example, one attorney for personal care could make

decisions about shelter, another about health care, and so on.

Consider also naming another person to act as an alternate or back-up substitute decision-maker to ensure you have a back-up substitute decision-maker of your choosing should the first person you named as your attorney for personal care be unable to act for you. For example, an alternate acting as your substitute decision-maker may relieve your first choice, perhaps a spouse or partner, of the pressure of making necessary care decisions in a time of emotional stress.

As long as you remain capable, you can execute a new Power of Attorney for Personal Care, revoking or changing who you have named as your attorney for personal care in a previous document.

What is an “advance care directive” or “living will” and how does it differ from a Power of Attorney for Personal Care?

An “advance care directive” or “living will” is used to document your care wishes so your substitute decision-maker can refer to it when making care decisions for you in the future, if and



when you can't make those decisions for yourself. It may also help your substitute decision-maker in her/his future dealings with your care providers.

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A Power of Attorney for Personal Care may be used for the same purpose as an “advance care directive” or “living will” but it also appoints your substitute decision-maker. If you do a living will and use it to name someone as your substitute decision-maker, then it may be a Power of Attorney for Personal Care if it meets the legal requirements – that is, that it be in writing, signed and dated by you, and witnessed by two people.

Does a lawyer need to prepare any advance care planning documents?

You do not need a lawyer to prepare any documents related to advance care planning, whether in the form of a Power of Attorney for Personal Care or an “advance care directive”. However, a lawyer may be helpful in explaining your options and can help you prepare such documents if you wish. Some of the important people to involve in advance care planning are your loved ones, your physicians and other key care providers.

Do advance care planning documents require a special form?

No special form is necessary to do advance care planning, although Power of Attorney for Personal Care forms are available free of charge from the Office of the Public Guardian and Trustee. You may prefer to use one of the forms or kits available for advance care planning (see Tip on page 35).

Does an Attorney for Personal Care also have authority over finances and personal property?

Your Attorney for Personal Care can deal **only** with your personal care decisions. Of course, those decisions may have to take your financial means into account.

If you wish to give someone the authority to make decisions about your finances, home and possessions, you must use a different legal document called a Continuing Power of Attorney for Property (also available free of charge from the Office of the Public Guardian and Trustee).

Carrying Out Your Care Choices

Will your expressed care choices always be followed?

Your substitute decision-maker must follow your expressed care wishes unless it is impossible to do so. If it is impossible to follow your wishes, your substitute decision-maker must act in your best interests.

For example, you may have said that you would never want to live in a long-term care facility, yet you need more care than is available for you in the community and do not have money to pay for private care. Another example of an impossible situation would be a wish for assisted suicide or euthanasia, as this is illegal in Ontario.

In emergency situations, ambulance attendants may not be able to follow your wishes. However, health care providers have to follow your wishes, if they know what they are, in any and all emergency situations.



What happens to advance care arrangements if a person is outside of Ontario? Will other jurisdictions recognize advance care arrangements?

Different jurisdictions have different legislation regarding advance care planning.

If you spend time outside Ontario, it is a good idea to consult a lawyer about whether your wishes will be followed and your substitute decision-maker recognized in the province or country you intend to visit.

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If You Don't Appoint a Substitute Decision-Maker

What happens if a Power of Attorney for Personal Care is not completed?

Ontario law does not ensure there will be a substitute decision-maker to make all your personal care decisions for you unless you appoint a substitute decision-maker through a Power of Attorney for Personal Care.

However, the law does make sure that there will always be a substitute decision-maker to make

some health decisions for you, but this includes decisions only about:

- your health care, (e.g. treatments)
- your admission to a long-term care facility, and
- the personal assistance services you will receive in a long-term care facility.

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If you have not designated a substitute decision-maker through a Power of Attorney for Personal Care, a health care provider must turn to the hierarchy of substitutes named in the law to make the above types of health decisions. The highest-ranking person on this list who is available, capable and willing to make these decisions will become your substitute decision-maker for treatment.

- **Your spouse, common-law spouse or partner**
- **Your child** (if they are 16 years of age or older) **or parent**
- **Your parent with right of access only**
Custodial parents rank ahead of non-custodial parents
- **Your brother or sister**
- **Any other relative by blood, marriage or adoption**

The Office of the Public Guardian and Trustee.

The provincial Public Guardian and Trustee is the substitute decision-maker of last resort if there is no other appropriate person to act for you.

If there are two or more persons (for example two sisters and one brother) described in the same subsection of the above hierarchy, who meet the requirements to give or refuse consent on an incapable person's behalf, they may share the decision-making responsibility or may choose to designate a spokesperson. If there is a disagreement among equally ranked decision-makers that cannot be resolved, the Office of the Public Guardian and Trustee may be asked to make the decision.

If you have not appointed a substitute decision-maker anyone, including your family or friends, can apply to the Consent and Capacity Board to become your substitute decision-maker for *medical treatment, admission to long-term care facility, and personal assistance services in a long-term care facility*. They do not have to pay anything to do this. This is known as your **board-appointed representative**. A board-appointed representative ranks above your spouse, partner and other family

members in the hierarchy of substitute decision-makers named in the law.

If you have not appointed a substitute decision-maker, almost anyone, including family members and friends, can apply to the Superior Court of Ontario to be appointed as your **“Guardian of the Person” with authority for treatment**. Like an attorney for personal care, a Guardian of the Person may be authorized to make *the full range of personal care decisions for you*, in keeping with your known wishes. A “Guardian of the Person” with authority for treatment ranks highest on the hierarchy of substitute decision-makers named in the law.

Note: The above hierarchy of substitutes named by the Ontario law does not take effect if you have designated a substitute decision-maker with decision-making authority for health care through a Power of Attorney for Personal Care (see page 22 for more information on how to designate a substitute decision-maker). It is important to designate a substitute decision-maker through a Power of Attorney for Personal Care to ensure you have a person of *your* choice making decisions about *both* your health care and other aspects of your personal care.

Steps in Advance Care Planning

Think about your values, and what's important to you.

What kind of personal care would you want—or not want—to receive if you were not capable of deciding for yourself? Personal care does not deal with financial matters, but rather with the medical treatment you receive, your nutrition and hygiene, where you live and with whom, and your personal safety.

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Consult people you trust who can provide guidance.

What are the legal aspects of advance care planning? How does your faith influence your decision? What decisions are most likely to be needed given your health? Your doctor, lawyer and/or faith leader may be able to give you some information to help you make your advance care plans.

Decide on and appoint a substitute decision-maker.

Who would you want to make decisions for you if you were not



capable? You can choose one or more people to act for you, but make sure that they understand their job and are willing to accept responsibility for carrying out your wishes.

Make your choices clear to others.

How can your substitute decision-maker make the same choices that you would make for yourself in whatever situations arise? You need to communicate your care wishes clearly, while you are capable, to your substitute decision-maker as well as to your family, friends and health care providers, as you see fit. You and your substitute decision-maker may find it helpful if you write down your wishes, but you do not have to do this.

Give your substitute decision-maker the power to act on your behalf.

How can your substitute decision-maker make personal care decisions on your behalf? You need to do two things: tell them your care wishes, and appoint them to act as your substitute decision-maker through a Power of Attorney for Personal Care. A Power of Attorney for Personal Care must be in writing, signed and dated by you, and witnessed by two people.

Carry your substitute decision-maker wallet card.

How will anyone know you have a substitute decision-maker, and how to contact him or her, if you become incapable? Fill out, tear off and carry with you the wallet card provided in this booklet (see below). It identifies your substitute decision-maker and tells others how to reach them if needed.

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Where to Get More Information

Tip: The most important part of advance care planning is thinking through and communicating your wishes to your substitute decision-maker. There are, however, some good, Ontario-based products available that you may choose to use to assist you in your advance care planning. A good start would be the Public Guardian and Trustee Powers of Attorney Kit through which you can appoint a substitute decision-maker and express your care wishes. If you want information on where to find these additional resources, contact your local Alzheimer Society Public Education Coordinator or one of the other organizations listed on the following pages.

A list of community resources to assist with advance care planning

This booklet, *A Guide to Advance Care Planning*, is available online at the Ontario Senior's Secretariat Web site at **www.gov.on.ca/mczcr/seniors** or by calling the Seniors' INFOline at **1-888-910-1999**.

Ontario Seniors' Secretariat (OSS)

Ontario is home to about 1.5 million seniors – 40 per cent of Canada's seniors. By 2041, it is estimated that almost a quarter of Ontario's population will be over 65. The Ontario Seniors' Secretariat has two primary tasks: to develop and support government initiatives which improve the quality of life of Ontario's seniors and to undertake and support public education efforts for and about Ontario's seniors.

Ontario Seniors' Secretariat
Ministry of Citizenship
77 Wellesley Street West
6th Floor Ferguson Block
Toronto ON M7A 1R3

Web site: www.gov.on.ca/mczcr/seniors

Seniors' INFOLine

Toll-free: 1-888-910-1999 (Ontario only)

Local calls: 416-314-7511

TTY: 1-888-387-5559 (Ontario only)

Alzheimer Society of Ontario (ASO)

The Alzheimer Society of Ontario is a province-wide, not-for-profit organization with a membership of 39 local Chapters located throughout Ontario. The ASO supports the local Chapters to provide education and support services to improve the quality of life of persons with Alzheimer Disease and related dementias and their caregivers. For the telephone number of an Alzheimer Society Chapter in your community, contact:

Telephone: 416-967-5900

Web site: www.alzheimer.ca

Office of the Public Guardian and Trustee

The Office of the Public Guardian and Trustee is part of the Ontario Ministry of the Attorney General. Contact them for information about Powers of Attorney for Personal Care; Continuing Powers of Attorney for Property; the Substitute Decisions Act; and guardianship.

Telephone: 416-314-2800 (Toronto)

1-800-366-0335 (toll-free)

Web site: www.attorneygeneral.jus.gov.on.ca

(click on “Office of the Public Guardian and Trustee”.)

Community Care Access Centres (CCACs)

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CCACs provide access for people who need in-home health services and support or accommodation in long-term care centres. There are Community Care Access Centres throughout Ontario, funded by the Ministry of Health and Long-Term Care. Contact your local CCAC for information about personal care services, respite care, homemaking and other services available in your community. For the telephone number for your local Community Care Access Centre, contact:

Ministry of Health and Long-Term Care

INFOline: 1-800-268-1154

Web site: www.gov.on.ca/health

Regional Geriatric Programs (RGPs) of Ontario

RGPs offer a range of specialized geriatric services that assess and treat functional, medical and psychosocial aspects of illness and disability in older adults who have multiple and complex needs.

The RGP services five regional areas of Toronto, Kingston, Hamilton, Ottawa and London. For information about cognitive assessments, care planning, services for seniors or contact information for a regional office, contact:

Telephone:

Toronto 416-480-6026

Kingston 613-544-7767

Ottawa 613-761-4568

Hamilton 905-521-2100, ext. 74007

London 519-685-4046

Web site: www.rgps.on.ca

Advocacy Centre for the Elderly (ACE)

ACE is a legal clinic for low-income seniors aged 60 or older in the greater Toronto area. It provides legal advice and representation, legal education and advocacy services and has expertise in advance care planning. To reach ACE, contact:

Telephone: 416-598-2656

Web site: www.advocacycentreelderly.org

Law Society of Upper Canada

As a service to the public and members, the Law Society of Upper Canada provides links to lawyers that have been submitted by law firms and individual lawyers. No endorsement is implied. To find a lawyer, contact:

Web site: www.lsuc.on.ca

Online Yellow Pages: www.yellowpages.ca

Lawyer Referral Service (LRS)

Telephone: 1-900-565-4577

(Please note that you must be 18 years of age to access this service, and that, at the time of printing this guide, there is an automatic \$6 toll charge for calling this number).

Legal Aid

Telephone: 1-800-668-8258 (toll-free)

Web site: www.legalaid.on.ca

Consent and Capacity Board

The Consent and Capacity Board is an independent body created by the provincial government that conducts hearings under the Mental Health Act, the Health Care Consent Act and the Substitute

Decisions Act. For further information regarding hearings related to capacity, wishes and substitute decision-making as well as application forms and detailed contact information for the regional and head offices of the Board, contact:

Telephone: 416-327-4142

Web site: www.ccboard.on.ca

Publications Ontario

This booklet provides information about some features of Ontario's Health Care Consent Act and the Substitute Decisions Act. Copies of these Acts and other legislation are available from Publications Ontario.

Telephone: 416-326-5300 (Toronto)

1-800-668-9938 (toll-free)

Web site: www.gov.on.ca (follow the link for "laws")

Summary of Steps in Advance Care Planning

- Think about your own values and wishes.
- Consult people who can provide advice and guidance, such as your doctor, lawyer, or faith leader.
- Think about the people that you trust to make personal care decisions on your behalf, in accordance with your wishes.
- Decide who your substitute decision-maker should be.
- Appoint your substitute decision-maker to act for you, if necessary.
- Make your care wishes clear to your substitute decision-maker and others close to you.
- If your care wishes change, let your substitute decision-maker know. Revise any written or taped instructions.
- Fill out and carry with you the wallet card provided in this booklet to identify your substitute decision-maker and tell others how to reach them if needed.

Alphabetical Listing of Contacts

Advocacy Centre for the Elderly (ACE)

Telephone: 416-598-2656

Web site: www.advocacycentreelderly.org

Alzheimer Society of Ontario (ASO)

Telephone: 416-967-5900

Web site: www.alzheimer.ca

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Community Care Access Centres (CCACs)

Ministry of Health and Long-Term Care INFOline:
1-800-268-1154

Web site: www.gov.on.ca/health

Consent and Capacity Board

Telephone: 416-327-4142

Web site: www.ccboard.on.ca

Law Society of Upper Canada

Telephone: 1-900-565-4577

(there is a \$6 charge for each call)

Web site: www.lsuc.on.ca

Legal Aid Ontario

Telephone: 1-800-668-8258

Web site: www.legalaid.on.ca

Office of the Public Guardian and Trustee

Telephone: 416-314-2800 (Toronto)

1-800-366 0335 (toll-free)

Web site: www.attorneygeneral.jus.gov.on.ca

Ontario Seniors' Secretariat (OSS)

Seniors' INFO Line:

Toll-free: 1-888-910-1999 (Ontario only)

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TTY: 1-888-387-5559 (Ontario only)

Web site: www.gov.on.ca/mczcr/seniors

Publications Ontario

Telephone: 416-326-5300 (Toronto)

1-800-668-9938 (toll-free)

Web site: www.gov.on.ca

Regional Geriatric Programs (RGPs) of Ontario

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Kingston 613-544-7767

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Hamilton 905-521-2100, ext. 74007

London 519-685-4046

Web site: www.rgps.on.ca



A Guide to Advance Care Planning is available at
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